



⊥ World Congress of □ Cutaneous Lymphomas



Biologic Insights #192

Tracing the evolutionary origins and transcriptomic variability in Sézary syndrome and mycosis fungoides

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I do not have any relevant financial relationships.

This presentation and/or comments will provide a balanced, non-promotional, and evidence-based approach to all diagnostic, therapeutic and/or research related content.

The off-label/investigational use of dupilumab will be addressed.





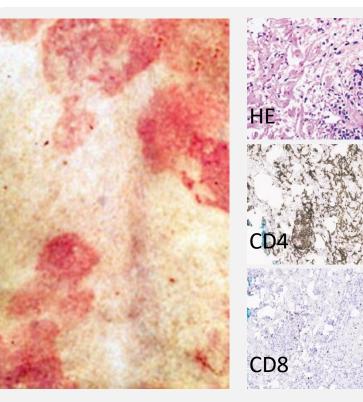


Is Sézary Syndrome related to MF?

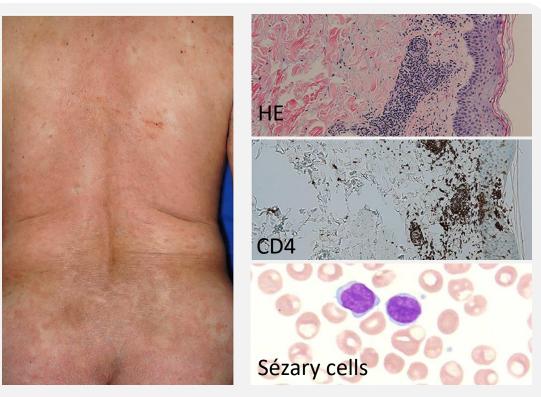
Mycosis Fungoides (MF)

Vs

Sézary Syndrome (SS)



[LeBlanc RE. Mycosis Fungoides. www.pathologyoutlines.com. 2022]



[Kamijo H, et al. J Dermatol. 2019; Lazarchick J ASH Image Bank. 2010]





Skin resident effector memory T cells

Mycosis Fungoides (MF)



Journal of the American Academy of Dermatology Volume 77, Issue 4, October 2017, Pages 719-727

Original article

Early clinical manifestations of Sézary syndrome: A multicenter retrospective cohort study

Aaron R. Mangold MD^a A gnieszka K. Thompson MD^{b c}, Mark D. Davis MD^b, Ieva Saulite MD^d, Antonio Cozzio MD^{d e}, Emmanuella Guenova MD, PhD^{d e}, Emmilia Hodak MD, PhD^f, Iris Amitay-Laish MD^f, Ramon M. Pujol MD, PhD^g, Mark R. Pittelkow MD^a, Robert Gniadecki MD, PhD^{h i}

[LeBlanc RE. Mycosis Fungoides. *www.pathologyoutlines.com.* 2022]

Central memory T cells

Sézary Syndrome (SS)

Contraction of the offers	
Characteristic	Value, N=263
Earliest recorded signs	
Nonspecific dermatitis, n (%) [†]	129 (49.0)
Erythroderma, n (%)	66 (25.1)
Patches and plaques suggestive of MF or parapsoriasis, n (%)	28 (10.6)
Leukemia without erythroderma, n (%)	23 (8.7)
AD-like lesions, n (%)	13 (4.9)
Isolated lymphadenopathy, n (%)	1 (0.4)
Urticaria followed by dermatitis, n (%)	1 (0.4)
Unknown, n (%) [Kamijo H, et al. <i>J Dermatol.</i> 2019; Lazarcnick J <i>ASH</i>	2 (0.8) Птаде вапк. 2010]



Enhancing the Ability to Diagnose, Interpret and Apply Best Treatment Options for Cutaneous Lymphomas

Vs



Skin resident effector memory T cells

S blood

Mycosis Fungoides (MF)

Central memory T cells

Sézary Syndrome (SS)

BRIEF REPORT | AUGUST 5, 2010

Vs

Sézary syndrome and mycosis fungoides arise from distinct T-cell subsets: a biologic rationale for their distinct clinical behaviors

🖨 Brief Report

James J. Campbell, Rachael A. Clark, Rei Watanabe, Thomas S. Kupper

LETTER TO BLOOD | SEPTEMBER 21, 2017

Circulating and skin-derived Sézary cells: clonal but with phenotypic plasticity

Marie Roelens, Marc Delord, Caroline Ram-Wolff, Anne Marie-Cardine, Antonio Alberdi, Guitta Maki, Laurence Homyrda, Armand Bensussan, Martine Bagot, Antoine Toubert, Hélène Moins-Teisserenc

[LeBlanc RE. Mycosis Fungoides. *www.pathologyoutlines.com*. 2022]

S blood

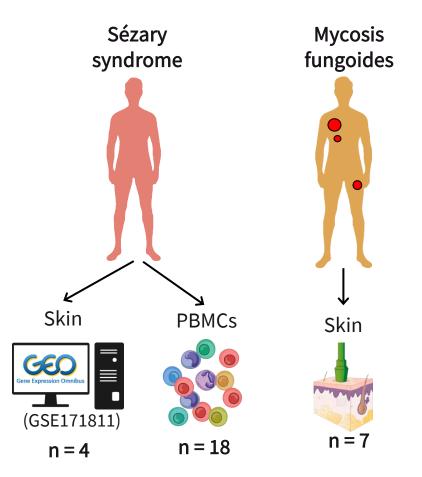
[Kamijo H, et al. J Dermatol. 2019; Lazarchick J ASH Image Bank. 2010]





A new approach to an old question

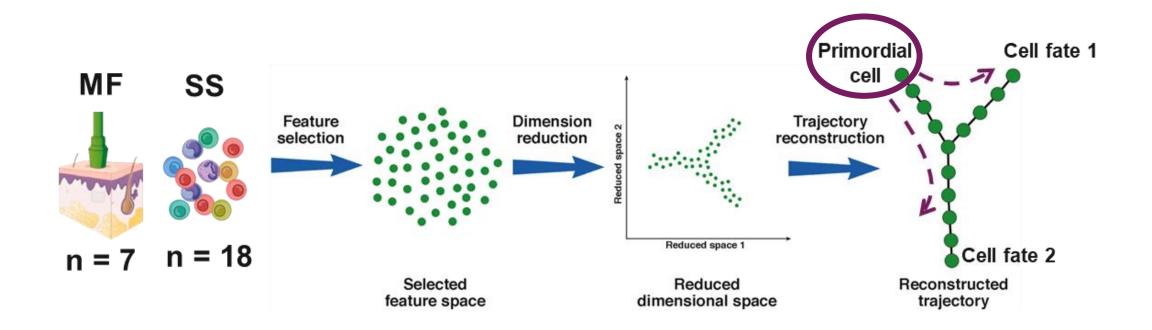
Single cell transcriptomics







Monocle cell lineage reconstruction

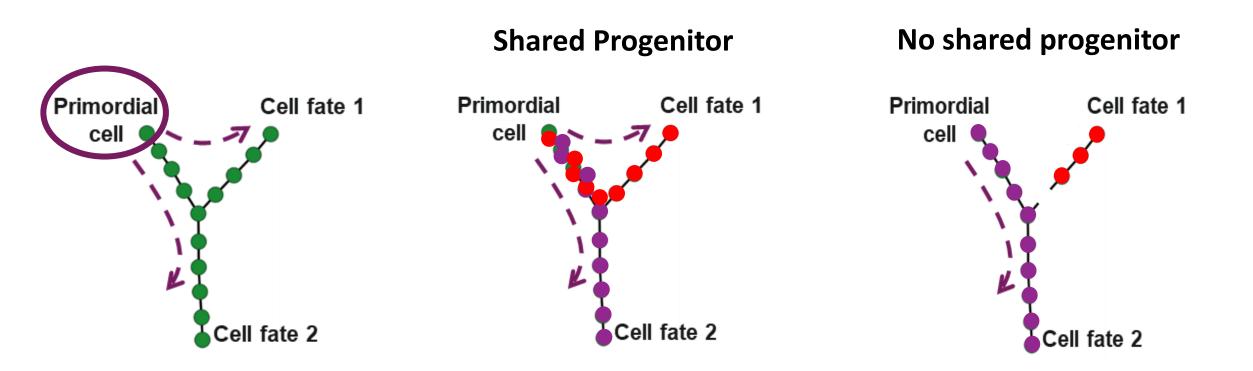


Using Monocle 2, we can use the heterogeneity captured by scRNAseq to predict a cell differentiation pathway





Do Sézary cells share a progenitor with MF?

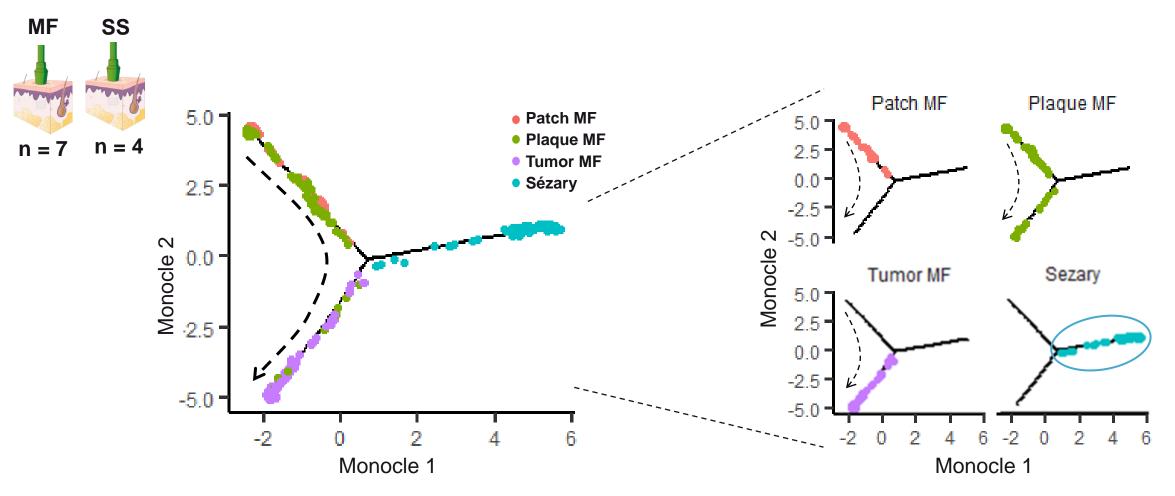


A branch with overlapping cells from MF or SS would indicate a shared precursor.





Do skin SS cells share a common progenitor with MF?

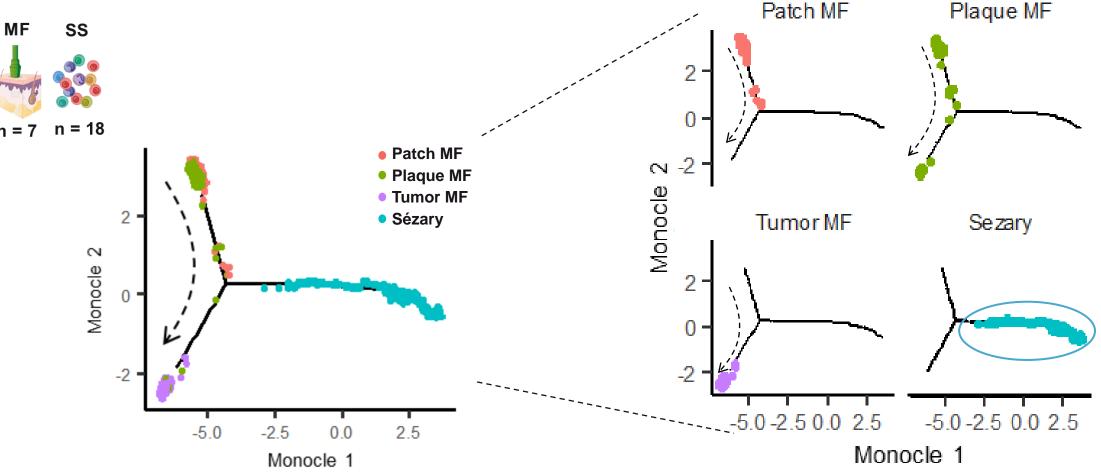


Skin malignant Sézary cells do not share a common progenitor cell with mycosis fungoides





Do peripheral blood Sézary cells share a common progenitor with MF?

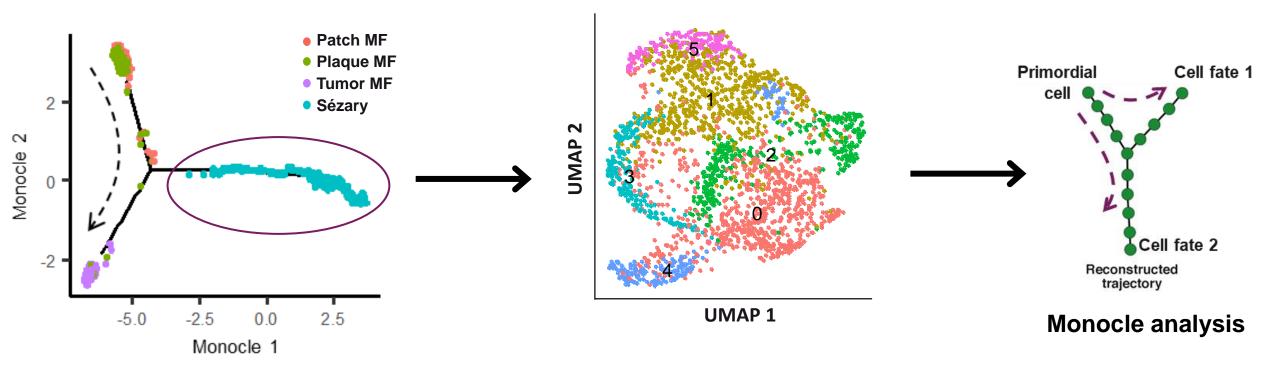


Sézary cells in blood do not share a common progenitor cell with mycosis fungoides





Deciphering heterogeneity: How are some malignant cells surviving treatment?

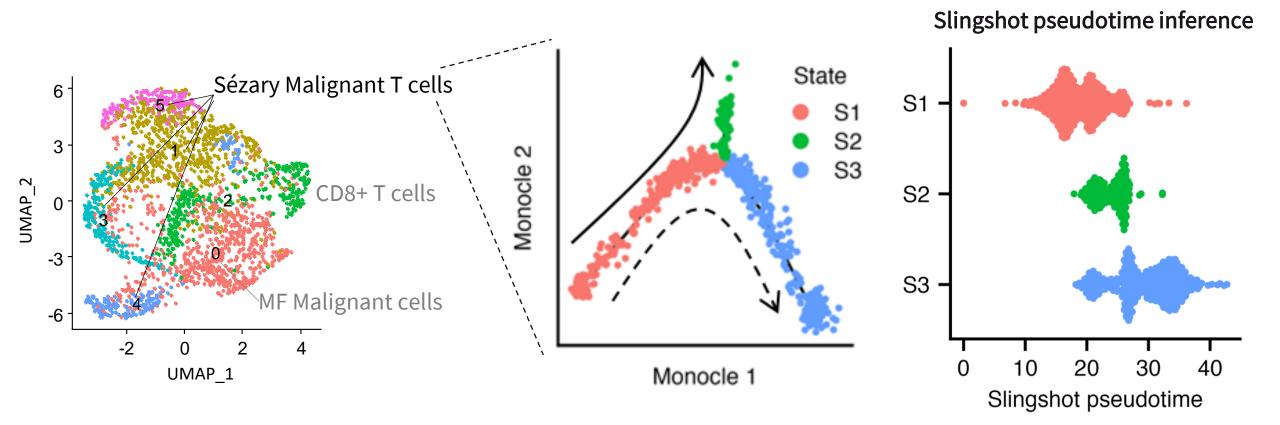


Could specific cell subsets contribute to treatment resistance?





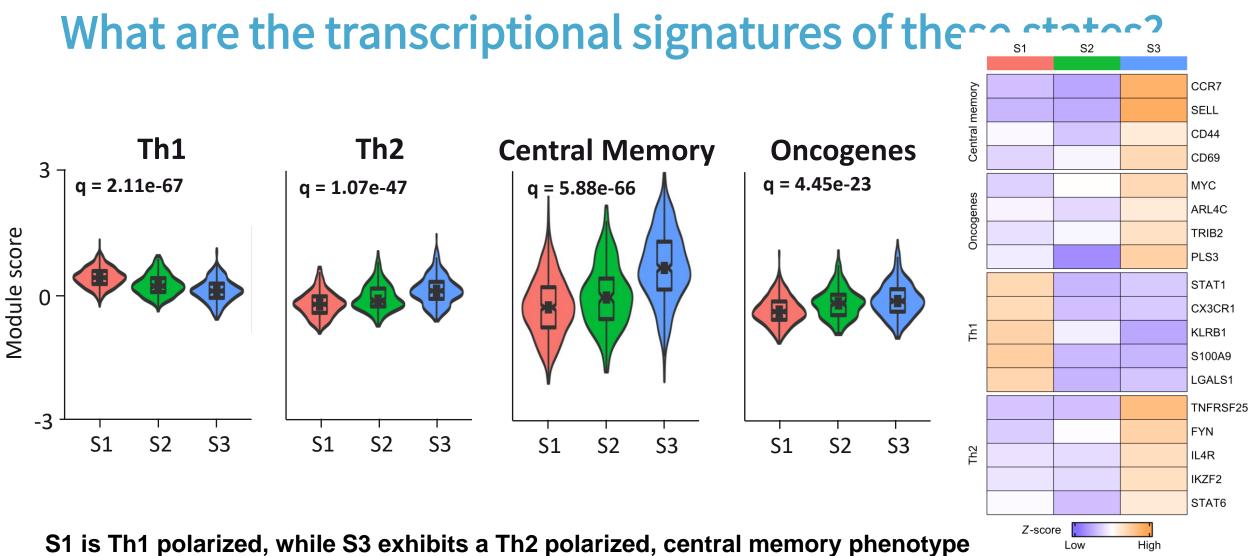
Are there distinct Sézary cell subsets?



Monocle identifies three Sézary cell subsets, with the S1 phenostate as the primordial state and the S3 phenostate as the terminal state of differentiation





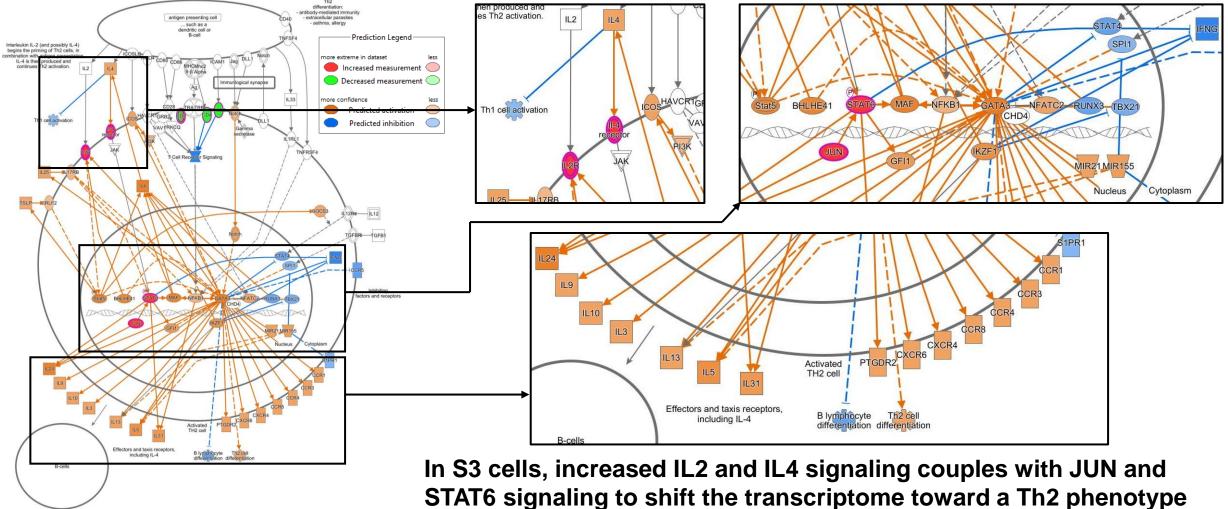


with increased oncogene expression





What molecular pathways are involved? Th2 activation in S3 subset

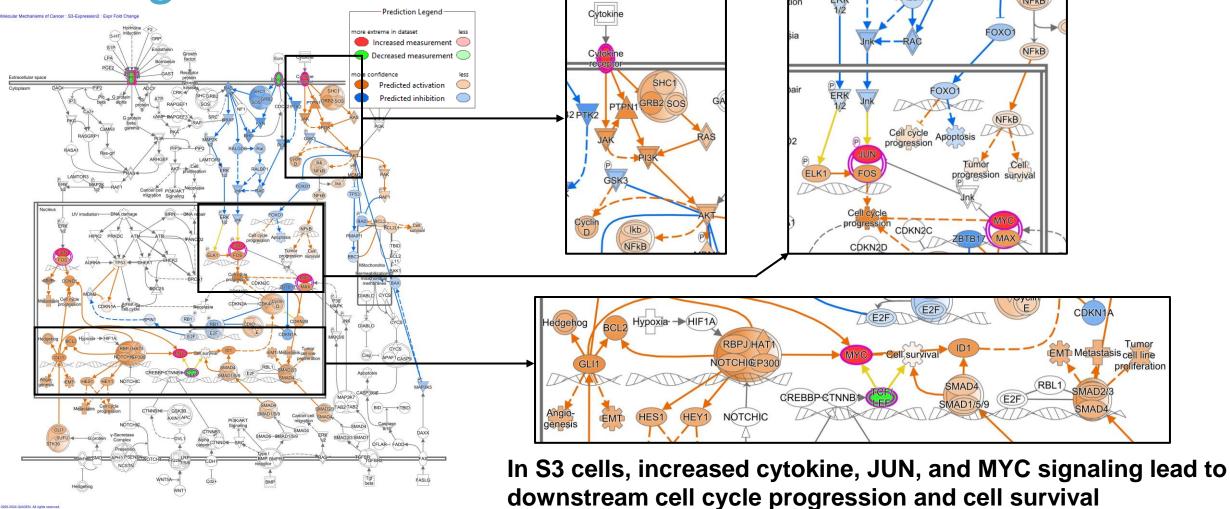




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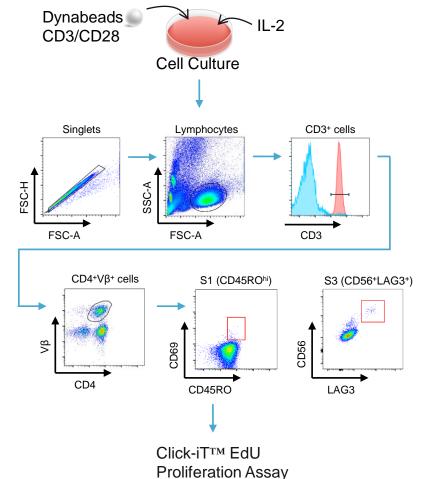
What molecular pathways are involved? Oncogenes in S3 Subset



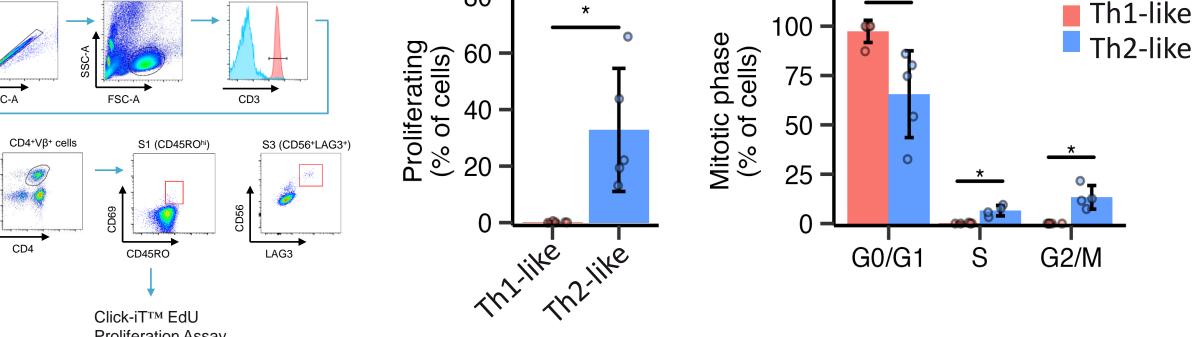




Are these Sézary cell subsets real?



Cell Proliferation by Subset



Th2-like cells have greater proliferation capacity than Th1-like cells, which are largely quiescent

80





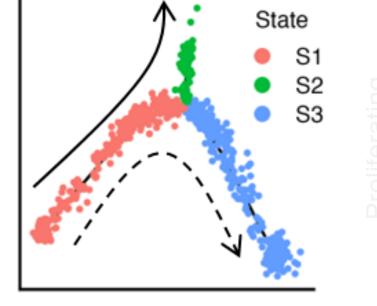
Are these Sézary cell subsets real?



2

Monocle





Monocle 1

Click-iT™ EdU Proliferation Assay

Cell Proliferation by Subset

The S1 subset is in a Th1-polarized primordial state that differentiates into the S3 subset, which is a Th2polarized central-memory terminal state with increased proliferation capacity and malignant potential.



G0/G1 S G2/M

Th2-like cells have greater proliferation capacity than Th1-like cells, which are largely quiescent





How do these cells respond to IL-4 and dupilumab?



Short Report 🛛 🔂 Full Access

Rapid and sustained control of itch and reduction in Th2 bias by dupilumab in a patient with Sézary syndrome

O. Steck, N.L. Bertschi, F. Luther, J. van den Berg, D.J. Winkel, A. Holbro, C. Schlapbach 🔀

First published: 17 October 2020 | https://doi.org/10.1111/jdv.17001 | Citations: 22



RESEARCH LETTER | VOLUME 83, ISSUE 1, P197-199, JULY 2020

Progression of cutaneous T-cell lymphoma after dupilumab: Case review of 7 patients

Maria L. Espinosa, BS • Morgan T. Nguyen, BA • Amaia Saenz Aguirre, MD • ... Laura B. Pincus, MD • Joan Guitart, MD • Xiaolong A. Zhou, MD, MSc <u>& </u> • Show all authors

Journal of Cutaneous Immunology and Allergy

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Dupilumab aggravates Sézary syndrome: The importance of accurate pathological diagnosis

<u>Home</u> > <u>American Journal of Clinical Dermatology</u> > Article

Development of Cutaneous T-Cell Lymphoma Following Biologic Treatment: A Systematic Review

Systematic Review | Published: 10 January 2023

Research letter

Diagnosis of mycosis fungoides or Sézary syndrome after dupilumab use: A systematic review

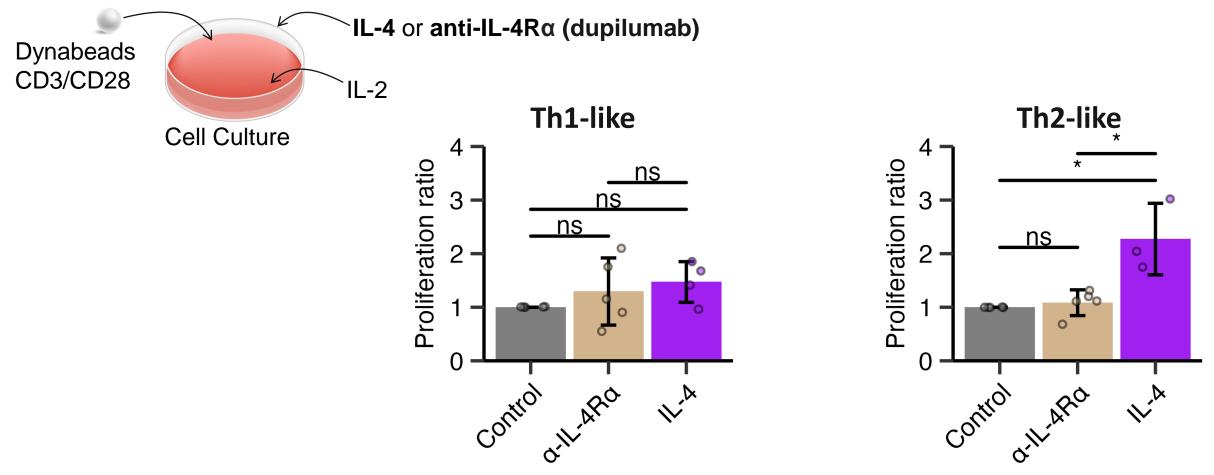
Abdulhadi]fri MD, MSc ^{a b c d e},]effrey S. Smith MD, PhD ^{a c f g h i}, Cecilia Larocca MD ^{a b c} 🙁 🖂

Case reports of Sezary syndrome treatment using dupilumab show brief remission, rapid disease progression, and even new disease onset





How do these cells respond to IL-4 and dupilumab?



Th2-like cells proliferate in response to IL-4 while Th1-like cells do not

Dupilumab is ineffective on both cell subsets

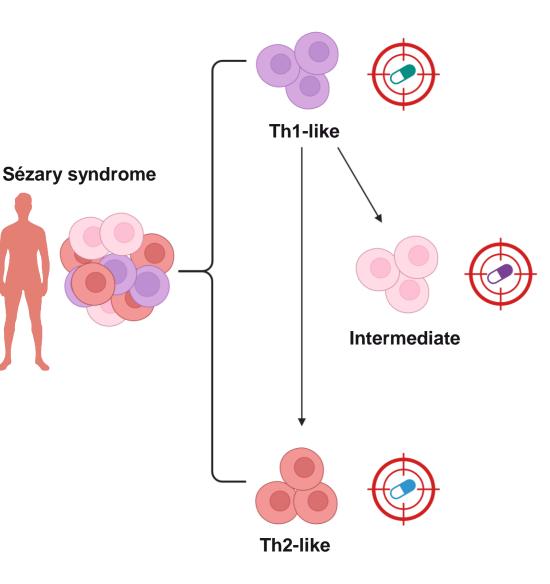






Summary

- Through single cell lineage reconstruction, we provide further evidence that SS and MF are distinct entities
- Additionally, we find that heterogeneous malignant populations in SS are composed of subpopulations with different T helper polarizations
- Muti-targeted therapy may be necessary for successful control of Sézary syndrome







Thank you!





Dr. Jiang Dr. Kruglov

A Virmani



Dr. Geskin

Dr. Falo



Dr. Akilov











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Martin and Dorothy Spatz Foundation